



## PART B - FEE(S) TRANSMITTAL

IFW

Complete and send this form, together with applicable fee(s), to: Mail

DEC 27 2004

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**

**or Fax (703) 746-4000**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 10/04/2004

Michael J. Mallie  
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP  
Seventh Floor  
12400 Wilshire Boulevard  
Los Angeles, CA 90025-1026

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

<i>Angela M. Quinn</i>	(Depositor's name)
<i>[Signature]</i>	
<i>December 21, 2004</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/759,002	01/11/2001	Mark Peairs	12/28/2004 WASFAW2 74451-P084XC 00000029 022666	09759002 1007

TITLE OF INVENTION: AUTOMATIC DOCUMENT ARCHIVING FOR A COMPUTER SYSTEM

01 FC:1501 1400.00 DA  
02 FC:1504 300.00 DA  
03 FC:8001 30.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	01/04/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CANGIALOSI, SALVATORE A	3621	380-029000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

RICOH COMPANY LTD. and Ricoh Corporation

Tokyo, Japan and West Caldwell, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

- Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies ten (10)

4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Michael J. Mallie

Date 12/21/04

Typed or printed name Michael J. Mallie

Registration No. Req. No. 36,591

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## FEE TRANSMITTAL FOR FY 2005

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**TOTAL AMOUNT OF PAYMENT (\$)** 1,730.00

**Complete if Known:**

Application No. 09/759,002  
 Filing Date January 11, 2001  
 First Named Inventor Mark Pears  
 Examiner Name Salvatore A. Cangialosi  
 Art Unit 3621  
 Attorney Docket No. 74451.P084XC

\_\_\_\_\_  
 Applicant claims small entity status. See 37 CFR 1.27.

**METHOD OF PAYMENT** (check all that apply)

Check     Credit Card     Money Order     None     Other (please identify)

XX  Deposit Account

Deposit Account Number : 02-2666

Deposit Account Name: \_\_\_\_\_

The Director is Authorized to do the following with respect to the above-identified Deposit Account:

Charge fee(s) indicated below.

Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

Charge fee(s) indicated below except for the filing fee

Credit any overpayments.

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

**Warning:** Information on this form may become public. Credit card information should not be included on this form.  
 Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fees Paid (\$)</u>
Fee	Fee	Fee	Fee		
Code	(\$)	Code	(\$)	Utility application filing fee Utility search fee Utility examination fee	1,000/500
1011	300	2011	150		
1111	500	2111	250		
1311	200	2311	100		
1012	200	2012	100	Design application filing fee	430/215
1112	100	2112	50	Design search fee	
1312	130	2312	65	Design examination fee	
1013	200	2013	100	Plant filing fee	660/330
1113	300	2113	150	Plant search fee	
1313	160	2313	80	Plant examination fee	
1004	300	2004	150	Reissue filing fee	1,400/700
1114	500	2114	250	Reissue search fee	
1314	600	2314	300	Reissue examination fee	
1005	200	2005	100	Provisional application filing fee	

**SUBTOTAL (1) \$** \_\_\_\_\_

## 2. EXCESS CLAIM FEES

	<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fees Paid (\$)</u>
Total Claims _____ - 20 or HP = _____		X _____ = _____	
HP = highest number of total claims paid for, if greater than 20			
Independent Claims _____ - 3 or HP = _____		X _____ = _____	
HP = highest number of independent claims paid for, if greater than 3			
Multiple Dependent Claims _____ = _____			
<b>Large Entity</b>	<b>Small Entity</b>		
Fee Fee	Fee Fee		
Code (\$)	Code (\$)	<u>Fee Description</u>	
1202 50	2202 25	Each claim over 20	
1201 200	2201 100	Each independent claim over 3	
1203 360	2203 180	Multiple dependent claims, if not paid	
1204 200	2204 100	Reissue: each claim over 20 and more than in the original patent	
1205 50	2205 25	Reissue: each independent claim more than in the original patent	
		SUBTOTAL (2) \$ _____	

## 3. APPLICATION SIZE FEE

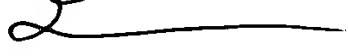
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each add'l 50 or fraction thereof</u>	<u>Fee from below</u>	<u>Fees paid (\$)</u>
_____ - 100 = _____ / 50 = _____ (round up to whole number)	X _____	_____		

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description:</u> Application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings):
Fee Fee	Fee Fee	
Code (\$)	Code (\$)	
1081 250	2081 125	Utility
1082 250	2082 125	Design
1083 250	2083 125	Plant
1084 250	2084 125	Reissue

SUBTOTAL (3) \$ \_\_\_\_\_

**FEE CALCULATION (continued)****4. OTHER FEE(S)**

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
<b>Non-English Specification, \$130 fee (no small entity discount)</b>		
Fee Code	Fee (\$)	
1051	130	2051 65
1052	50	2052 25
1053	130	1053 130
1812	2,520	1812 2,520
1813	8,800	1813 8,800
1804	920*	1804 920*
1805	1,840*	1805 1,840*
1251	120	2251 60
1252	450	2252 225
1253	1,020	2253 510
1254	1,590	2254 795
1255	2,160	2255 1,080
1401	500	2401 250
1402	500	2402 250
1403	1,000	2403 500
1451	1,510	1451 1,510
1452	500	2452 250
1453	1,500	2453 750
1501	1,400	2501 700
1502	800	2502 400
1503	1100	2503 550
1462	400	1462 400
1463	200	1463 200
1464	130	1464 130
1807	50	1807 50
1806	180	1806 180
8021	40	8021 40
1809	790	2809 395
1814	130	2814 65
1810	790	2810 395
1801	790	2801 395
1802	900	1802 900
1504	300	1504 300
1505	300	1505 300
1803	130	1803 130
1808	130	1808 130
1454	1,370	1454 1,370
Other fee (specify) <u>Fee for 10 additional copies of Issued Patent</u> <u>30.00</u>		
Other fee (specify) _____		
<b>SUBTOTAL (4) \$ 1,730.00</b>		
*Reduced by Basic Filing Fee Paid		
<b>SUBMITTED BY:</b>		
Typed or Printed Name:	Michael J. Mallie	
Signature:		Date: December 21, 2004
Reg. Number:	36,591	Telephone Number: 408-720-8300

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: )  
Mark Peairs, et al. ) Art Unit: 3621  
Serial No.: 09/759,002 ) Examiner: Salvatore A. Cangialosi  
Filed: January 11, 2001 )  
For: AUTOMATIC DOCUMENT )  
ARCHIVING FOR A COMPUTER )  
SYSTEM )

I hereby certify that this correspondence is being deposited  
with the United States Postal Service as first class mail with  
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for Patents, PO. Box 1450, Alexandria, Virginia 22313-1450  
on December 21, 2004

Angela M. Quinn  
Date of Deposit

Name of Person Mailing Correspondence  
J. Mallie 12-21-04  
Signature Date

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice of Allowance mailed October 4, 2004, please charge our deposit account no. 02-2666 in the amount of \$1,430.00 for payment of the issue fee (soft copies requested) and \$300.00 for payment of the publication fee. .

Please charge any shortages or credit any overages to our Deposit Account No. 02-2666.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: 12/11/04

  
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